



STATE OF TENNESSEE  
**DEPARTMENT OF COMMERCE AND INSURANCE**  
500 JAMES ROBERTSON PARKWAY  
NASHVILLE, TENNESSEE 37243-5065

DON SUNDQUIST  
GOVERNOR

DOUGLAS M. SIZEMORE  
COMMISSIONER

## **BULLETIN**

### **BY FACSIMILE AND REGULAR MAIL**

**To:** All Health Maintenance Organizations Conducting Business in Tennessee

**From:** Douglas M. Sizemore *DMS/bb*  
Commissioner

**Date:** June 19, 1998

**Re:** Effect of Tenn. Code Ann. § 56-32-210 on Medicare Health Maintenance Organization ("HMO") Enrollees

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Please be advised that the United States Department of Health and Human Services ("HHS") has taken the position that Tenn. Code Ann. § 56-32-210 is preempted to the extent this statute requires this Department to review enrollee grievances or other complaints relating to Medicare plans issued by a licensed HMO. This Department concurs in this analysis. Do note that, under federal guidelines and T.C.A. § 56-32-210, this Department still has the responsibility to review and approve an HMO's internal grievance procedures for enrollees in Medicare plans. However, an enrollee's attempt to obtain review of any HMO decision on such a grievance is governed exclusively by federal Medicare standards.

If you have any further questions, please do not hesitate to contact either Deputy Commissioner Bill Young at (615) 741-2677 or Compliance Analyst Vicky Stotzer at (615) 741-2825.

Thank you as always for your assistance and cooperation.